

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER	18	5/4/94
EXAMINER	369	5-4-94
TYPIST	18	5-5-94
VERIFIER	W180	5/5/94
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY

INDEX OF CLAIMS

Claim	Date
Final	
Original	
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SYMBOLS

✓ Rejected

..... Allowed

- (Through numeral) Canceled

+ Restricted

N Non-elected

I Interference

A Appeal

O Objected

Claim	Date
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